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Bib Data Sheet

CONFIRMATION NO. 2975

SERIAL NUMBER 10/051,360	FILING DATE 01/22/2002 RULE	CLASS 370	GROUP ART UNIT 2662	ATTORNEY DOCKET NO.
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APPLICANTS

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** CONTINUING DATA ***** J - ml

This application is a CON of 09/610,629 07/05/2000 ABN
which is a CON of 09/071,301 05/01/1998 ABN

** FOREIGN APPLICATIONS ***** D - mm

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
** 02/20/2002

** SMALL ENTITY **

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____	STATE OR COUNTRY CANADA	SHEETS DRAWING 10	TOTAL CLAIMS 50	INDEPENDENT CLAIMS 2
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ADDRESS

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TITLE

Diversity communication system and method of operation thereof

FILING FEE RECEIVED 640	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit _____
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